

**SUMMARY of the Decision of the Inquiries, Complaints and Reports Committee
(the Committee)**
(Information is available about the complaints process [here](#) and about the Committee [here](#))

**Dr. Ashwin Maharaj (CPSO #67100)
(the Respondent)**

INTRODUCTION

The Complainant was referred to the Respondent, a general surgeon, for a sigmoidoscopy to investigate hemorrhoids and associated symptoms. Following an initial examination, the Respondent recommended laser treatment for the hemorrhoids, a non-OHIP insured service, at a cost of \$3600. The Complainant completed the paperwork for treatment while on the procedure bed and agreed to proceed despite feeling rushed. Post-procedure, the Complainant learned that the Respondent had only partially completed the proposed treatment. She paid the Respondent half the original fee. The Complainant subsequently contacted the College of Physicians and Surgeons of Ontario (the College) to express concerns about the Respondent's care and conduct.

COMMITTEE'S DECISION

A Surgical Panel of the Committee considered this matter at its meeting of March 22, 2024. The Committee required the Respondent to appear before a Panel of the Committee to be cautioned with respect to failure to take an adequate history and fully examine a patient; failure to obtain informed consent; and the need to reflect on his ethical obligations as a physician with respect to what is best for patients. The Committee also agreed to accept an undertaking from the Respondent.

COMMITTEE'S ANALYSIS

As part of this investigation, the Committee retained an independent Assessor who specializes in general surgery. In summary, the Assessor opined that:

- The care the Respondent provided the Complainant did not meet the standard of practice of the profession with respect to shortcomings in medical history-taking and physical examination of the patient. The flexible sigmoidoscopy should have been done initially as part of the investigation of the Complainant's condition rather than as a means to provide treatment.
- Aspects of the Respondent's care displayed a lack of knowledge (use of, or reference to, an outdated technique in his documentation), but not a lack of skill or judgement.
- The Respondent's practice exposes patients to harm or injury in that the checklist physical examination has deficiencies in both medical history-taking

and physical examination which can lead to diagnostic and therapeutic errors.

- The method for digital anal dilatation (Lord procedure) the Respondent's operative note documents was abandoned decades ago due to high risk of sphincter injury and incontinence. Although the Respondent's description of his technique is different from the Lord procedure, nonetheless anal dilatation has risks and is not a standard part of the management of hemorrhoids.

Concerns that the Respondent failed to provide the Complainant time to read the consent forms or provide a clear, informed explanation for the procedure and did not provide the Complainant with a copy of the form; and failed to provide the Complainant with a full range of non-invasive options and OHIP-covered alternatives to make an informed decision about the treatment plan

The Committee was particularly concerned by the Assessor's view that the Respondent's practice exposes his patients to a risk of harm.

The Committee acknowledged that a report from the Respondent's opinion provider disagreed with the Assessor's view that the Respondent's care of the Complainant did not meet the standard of practice of the profession. Regardless, the Committee preferred the Assessor's opinion.

Overall, the care provided by the Respondent to the Complainant failed to meet the standard of practice of the profession and exposed his patients to a risk of harm, given the inadequacy of the assessment and the inability of the Complainant to provide fully informed consent.

The Committee's concern about the Respondent's care of the Complainant was amplified by similar concerns brought to the Committee's attention in three other complaints, which the Committee considered concurrently with the Complainant's matter.